Utah Department of Environmental Quality Division of Drinking Water

Public Water System Inventory Report

Run Date: 07/06/2011 12:40 pm

PWS ID: UTAH29088 **Name:** CAMP BEAVER

Legal Contact CORP OF PRESIDING BISHOP- LDS CHL Rating:

ROY BENSON MCDANIEL Rating Date:

Address: 50 E NORTH TEMPLE ST, RM 1205 Activity Status: Active

SALT LAKE CITY, UT 84150-6320

Phone Number: 801-240-4656

City Served (Area):

County: WEBER COUNTY

Gal/Day Gal/Min

System Type:Non-communityLast Inv Update:08/10/2010Avg Daily Prod:Activity Status Cd:ActiveLast Snty Srv Dt:11/05/2010Total Dsgn Cap:Population:25Surveyor:MICHAEL S MOSSTotal Emerg Cap:

Oper Period: 4/1 to 9/30

Contacts

| Contact | | Phone Numbers | | | | | | | |
|---------|----------------------|---------------|--------------|--------------|---------------------------|--|--|--|--|
| Type | Name | Title | Office | Emergency | Email Address | | | | |
| AC | MCDANIEL, ROY BENSON | ENGINEER | 801-240-4656 | 801-446-8498 | mcdanielrb@ldschurch .org | | | | |

Service Connections

| Connection | | | Number Connections | | | | |
|------------|-----------------|------------|--------------------|-----------------------|--|--|--|
| Туре | Meter Type Code | Meter Size | | | | | |
| Combined | Unknown | 0 | 3 | | | | |
| | | | 3 | Total Svc Connections | | | |

Storage

| Total Storage: 0 GAL Nun | nber of Units: 1 Ade | quate Capacity: NO |
|--------------------------|----------------------|--------------------|
|--------------------------|----------------------|--------------------|

| No. | Name | Туре | Effective Volume | Constr Matri | Overflow Elev | Activity Status | Press'd |
|-------|------------------------|--------|------------------|-----------------|------------------|--------------------|---------|
| ST001 | STORAGE FACILITY ST001 | Ground | 6,000 GAL | Steel | | I | |

Distribution System

| Pump Type | Total Dy | n Head | Pressure | Cross | Auhority |
|-----------|----------|--------|----------|------------|-----------|
| | ft H2O | P.S.I. | Adequate | Connection | Statement |
| | | | No | | |

Sources

| No. | Source Name | Activity Status | Source Type | Well Dia. | Safe Yield * | Pump Capacity | Data On File | Water Type | Availability | Period of Operation | Grnd Wtr Indicator | |
|-------|---------------------|--------------------|----------------|--------------|-----------------|------------------|-----------------|---------------|--------------|------------------------|-----------------------|--|
| WS001 | SPRING EAST OF CAMP | Active | SP | | | | No | GW | Seasonal | 4/1 to 9/30 | | |

Location

^{*}Reports measured flow for wells, approved design capacity for all other sources.